

COVER PAGE

Please type or print in ink.

NAME OF FILER (LAST)

(FIRST)

2015 MAR 19 PM (MIDDLE)

ABEL

PATRICIA

A

1. Office, Agency, or Court

Agency Name (Do not use acronyms)

RESOURCES AGENCY

Division, Board, Department, District, if applicable

Your Position

OIL, GAS & GEOTHERMAL RESOURCES

SUPERVISING SENIOR OIL & GAS ENGINEER

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency:

Position:

2. Jurisdiction of Office (Check at least one box)

State

Judge or Court Commissioner (Statewide Jurisdiction)

Multi-County Santa Cruz, Santa Clara, San Benito,

County of _____

City of Monterey, San Luis Obispo, Santa Barbara

Other Ventura and Northern Los Angeles County

3. Type of Statement (Check at least one box)

Annual: The period covered is January 1, 2017, through December 31, 2017.

Leaving Office: Date Left _____ / _____ / _____
(Check one)

-or-
The period covered is _____ / _____ / _____, through December 31, 2017.

The period covered is January 1, 2017, through the date of leaving office.

Assuming Office: Date assumed _____ / _____ / _____

The period covered is _____ / _____ / _____, through the date of leaving office.

Candidate: Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► Total number of pages including this cover page: 8

Schedules attached

Schedule A-1 - Investments - schedule attached
 Schedule A-2 - Investments - schedule attached
 Schedule B - Real Property - schedule attached

Schedule C - Income, Loans, & Business Positions - schedule attached
 Schedule D - Income - Gifts - schedule attached
 Schedule E - Income - Gifts - Travel Payments - schedule attached

-OR-

None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS
(Business or Agency Address Recommended - Public Document)

CITY

STATE

ZIP CODE

195 S. Broadway, Suite 101

Orcutt

93455

DAYTIME TELEPHONE NUMBER

(805) 937-7246

E-MAIL ADDRESS

Pat.Abel@conservation.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed March 15, 2018
(month, day, year)

Signature



(File the originally signed statement with your filing official.)

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

ABEL, PATRICIA

► NAME OF BUSINESS ENTITY

Automatic Data Processing

GENERAL DESCRIPTION OF THIS BUSINESS

Stock processing, payroll deduction program

FAIR MARKET VALUE

- \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

- Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____ / ____ / 17 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Carnival Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Cruise line

FAIR MARKET VALUE

- \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

- Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____ / ____ / 17 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

CDK Global

GENERAL DESCRIPTION OF THIS BUSINESS

Fast food

FAIR MARKET VALUE

- \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

- Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____ / ____ / 17 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

ConocoPhillips

GENERAL DESCRIPTION OF THIS BUSINESS

Refineries

FAIR MARKET VALUE

- \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

- Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____ / ____ / 17 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Motorola

GENERAL DESCRIPTION OF THIS BUSINESS

Communication systems

FAIR MARKET VALUE

- \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

- Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____ / ____ / 17 ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Pepsico Inc

GENERAL DESCRIPTION OF THIS BUSINESS

Beverages

FAIR MARKET VALUE

- \$2,000 - \$10,000 \$10,001 - \$100,000
 \$100,001 - \$1,000,000 Over \$1,000,000

NATURE OF INVESTMENT

- Stock Other _____
(Describe)
 Partnership Income Received of \$0 - \$499
 Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

____ / ____ / 17 ACQUIRED DISPOSED

Comments: _____

SCHEDULE A-1
Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____

ABEL, PATRICIA

► NAME OF BUSINESS ENTITY

Phillips 66

GENERAL DESCRIPTION OF THIS BUSINESS

Petroleum products, Gas stations

FAIR MARKET VALUE

- | | |
|--|--|
| <input type="checkbox"/> \$2,000 - \$10,000 | <input checked="" type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

NATURE OF INVESTMENT

- | | |
|---|---|
| <input checked="" type="checkbox"/> Stock | <input type="checkbox"/> Other _____
(Describe) |
| <input type="checkbox"/> Partnership | <input type="radio"/> Income Received of \$0 - \$499
<input type="radio"/> Income Received of \$500 or More (Report on Schedule C) |

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Yum Brand Inc.

GENERAL DESCRIPTION OF THIS BUSINESS

Fast food products

FAIR MARKET VALUE

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$2,000 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

NATURE OF INVESTMENT

- | | |
|---|---|
| <input checked="" type="checkbox"/> Stock | <input type="checkbox"/> Other _____
(Describe) |
| <input type="checkbox"/> Partnership | <input type="radio"/> Income Received of \$0 - \$499
<input type="radio"/> Income Received of \$500 or More (Report on Schedule C) |

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

General Electric

GENERAL DESCRIPTION OF THIS BUSINESS

Appliances, engines, medical machines, etc.

FAIR MARKET VALUE

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$2,000 - \$10,000 | <input type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

NATURE OF INVESTMENT

- | | |
|---|---|
| <input checked="" type="checkbox"/> Stock | <input type="checkbox"/> Other _____
(Describe) |
| <input type="checkbox"/> Partnership | <input type="radio"/> Income Received of \$0 - \$499
<input type="radio"/> Income Received of \$500 or More (Report on Schedule C) |

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
ACQUIRED DISPOSED

Comments: _____

► NAME OF BUSINESS ENTITY

Altaba Inc. Com

GENERAL DESCRIPTION OF THIS BUSINESS

Communications

FAIR MARKET VALUE

- | | |
|--|--|
| <input type="checkbox"/> \$2,000 - \$10,000 | <input checked="" type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

NATURE OF INVESTMENT

- | | |
|---|---|
| <input checked="" type="checkbox"/> Stock | <input type="checkbox"/> Other _____
(Describe) |
| <input type="checkbox"/> Partnership | <input type="radio"/> Income Received of \$0 - \$499
<input type="radio"/> Income Received of \$500 or More (Report on Schedule C) |

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

CIT

GENERAL DESCRIPTION OF THIS BUSINESS

Financial institution

FAIR MARKET VALUE

- | | |
|--|--|
| <input type="checkbox"/> \$2,000 - \$10,000 | <input checked="" type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

NATURE OF INVESTMENT

- | | |
|---|---|
| <input checked="" type="checkbox"/> Stock | <input type="checkbox"/> Other _____
(Describe) |
| <input type="checkbox"/> Partnership | <input type="radio"/> Income Received of \$0 - \$499
<input type="radio"/> Income Received of \$500 or More (Report on Schedule C) |

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
ACQUIRED DISPOSED

► NAME OF BUSINESS ENTITY

Intel Corp

GENERAL DESCRIPTION OF THIS BUSINESS

Computer hardware

FAIR MARKET VALUE

- | | |
|--|--|
| <input type="checkbox"/> \$2,000 - \$10,000 | <input checked="" type="checkbox"/> \$10,001 - \$100,000 |
| <input type="checkbox"/> \$100,001 - \$1,000,000 | <input type="checkbox"/> Over \$1,000,000 |

NATURE OF INVESTMENT

- | | |
|---|---|
| <input checked="" type="checkbox"/> Stock | <input type="checkbox"/> Other _____
(Describe) |
| <input type="checkbox"/> Partnership | <input type="radio"/> Income Received of \$0 - \$499
<input type="radio"/> Income Received of \$500 or More (Report on Schedule C) |

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
ACQUIRED DISPOSED

SCHEDULE A-2
Investments, Income, and Assets
of Business Entities/Trusts
 (Ownership Interest is 10% or Greater)

CALIFORNIA FORM **700**
 FAIR POLITICAL PRACTICES COMMISSION

Name _____

ABEL, PATRICIA

► 1. BUSINESS ENTITY OR TRUST

No formal partnership name dba Lone Valley Ranch

Name _____

2908 Reservoir Canyon Rd. San Luis Obispo 93401

Address (Business Address Acceptable) _____

Check one

Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

- \$0 - \$1,999
- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
 ACQUIRED DISPOSED

NATURE OF INVESTMENT

- Partnership
- Sole Proprietorship
- 50% Interest

Other _____

YOUR BUSINESS POSITION

Co-owner

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- \$0 - \$499
- \$500 - \$1,000
- \$1,001 - \$10,000
- \$10,001 - \$100,000
- OVER \$100,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None or Names listed below

101 Sales yard,
Visalia Livestock Market

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

- INVESTMENT
- REAL PROPERTY

Name of Business Entity, If Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
 ACQUIRED DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust
- Stock
- Partnership

Leasehold _____ Other _____

Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

Comments: Corporeal personal property only, heifers, cows & bulls

► 1. BUSINESS ENTITY OR TRUST

Name _____

Address (Business Address Acceptable) _____

Check one

Trust, go to 2 Business Entity, complete the box, then go to 2

GENERAL DESCRIPTION OF THIS BUSINESS

FAIR MARKET VALUE

- \$0 - \$1,999
- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
 ACQUIRED DISPOSED

NATURE OF INVESTMENT

- Partnership
- Sole Proprietorship
- Other

YOUR BUSINESS POSITION

► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- \$0 - \$499
- \$500 - \$1,000
- \$1,001 - \$10,000
- \$10,001 - \$100,000
- OVER \$100,000

► 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)

None or Names listed below

► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:

- INVESTMENT
- REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE

- \$2,000 - \$10,000
- \$10,001 - \$100,000
- \$100,001 - \$1,000,000
- Over \$1,000,000

IF APPLICABLE, LIST DATE:

/ / 17 / / 17
 ACQUIRED DISPOSED

NATURE OF INTEREST

- Property Ownership/Deed of Trust
- Stock
- Partnership

Leasehold _____ Other _____

Yrs. remaining

Check box if additional schedules reporting investments or real property are attached

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name _____

ABEL, PATRICIA

- * You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	
N/A	
ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF LENDER	
INTEREST RATE	TERM (Months/Years)
_____ %	<input type="checkbox"/> None
HIGHEST BALANCE DURING REPORTING PERIOD	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> Guarantor, if applicable	

NAME OF LENDER*	
<u>N/A</u>	
ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF LENDER	
INTEREST RATE	TERM (Months/Years)
<hr/> %	<hr/> <input type="checkbox"/> None
HIGHEST BALANCE DURING REPORTING PERIOD	
<input type="checkbox"/> \$600 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000
<input type="checkbox"/> Guarantor, if applicable	

Comments:

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM **700**
FAIR POLITICAL PRACTICES COMMISSION

Name

ABEL, PATRICIA

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME

Wineman Hotel Heirs

ADDRESS (Business Address Acceptable)

849 Higuera St. San Luis Obispo

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Commercial Rental Property

YOUR BUSINESS POSITION

Fractional interest owner (<10%)

GROSS INCOME RECEIVED No Income - Business Position Only

\$500 - \$1,000 \$1,001 - \$10,000

\$10,001 - \$100,000 OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

Salary Spouse's or registered domestic partner's income
(For self-employed use Schedule A-2.)

Partnership (Less than 10% ownership. For 10% or greater use
Schedule A-2.)

Sale of _____
(Real property, car, boat, etc.)

Loan repayment

Commission or Rental Income, list each source of \$10,000 or more
Handled and distributed by Andrews & Galloway

(Describe)

Other _____
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

- * You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

N/A

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

\$500 - \$1,000

\$1,001 - \$10,000

\$10,001 - \$100,000

OVER \$100,000

Comments: _____

INTEREST RATE

TERM (Months/Years)

_____ % None

SECURITY FOR LOAN

None Personal residence

Real Property

Street address

City

Guarantor

Other

(Describe)